

CITY OF GAHANNA, OHIO

DIVISION OF TAXATION 200 S. HAMILTON RD. GAHANNA, OH 43230 471-4101

INCOME TAX RETURN

FOR THE CALENDAR YEAR 2001

FORM IR

DUE ON OR BEFORE APRIL 15, 2002

YOUR SOCIAL SECURITY NO.

IF MOVED DURING YEAR GIVE DATE OF MOVE AND CURRENT DATE INTO GAHANNA: NEW ADDRESS						
DATE INTO GAHANNA:						
INTO GAHANNA:	T ADDRESS:					
DATE OUT OF GAHANNA:						
If name or address is incorrect, make necessary changes NEW ADDRESS						
1. ENTER TOTAL COMPENSATION RECEIVED BEFORE ANY PAYROLL DEDUCTIONS. INCLUDE DEFERRED INCOM						
PRINT EMPLOYER/CO. NAME ACTUAL CITY OF EMPLOYMENT GAHANNA TAX WITHHELD WAGES, ETC.	MUST					
\$ \$	SUBMIT					
	W-2(s)					
	AND					
	CHEDULES					
(A) TOTAL: IF NO OTHER TAXABLE INCOME, COMPUTE YOUR TAX ON LINE 4. \$ TOTAL WAGES, ETC. \$						
2. Profit from Income Other Than Wages (ATTACH COPY OF FEDERAL FORMS OR SUPPORTING SCHEDULES) INT. AND DIV. NOT CITY TAXABLE						
3. (a) Allowable Business Expenses (ATTACH COPY OF FEDERAL FORM 2106)						
(b) Moving Expense (SEE INSTRUCTIONS)						
4. Total Income (If Not Resident for Entire Year, Pro-rate Income on This Line) (SEE INSTRUCTIONS)						
5. Gahanna Income Tax - 1 ¹ / ₂ % of Line 4						
6. Credits: BE SURE W-2 SHOWS TAX PAID TO ANOTHER CITY OR ATTACH COPY OF OTHER CITY RETURN						
(A) Gahanna Tax Withheld by Employer(s)\$						
(B1) Payments on 2001 Declaration of Estimated Tax (PAYMENT RECEIVED AFTER DEC. 15 NOT REFLECTED)						
(B2) Other Credits in 2001						
(C) Credit Allowed for Tax Paid Other Cities whose Tax Rate is 1½% or More (See Instructions)						
(Credits on (C) and (D) Must be Pro-rated If Part-Year Resident)						
(If a Refund From Another City has been Requested, Tax Credit on (C) and (D) must be Figured on Amount Actually Taxed)						
(D) Credit Allowed for Tax Paid Other Cities whose Tax Rate is Less than 1½% (See Instructions)						
(E) Total Credits (MUST EQUAL 80% OF LINE 5 TO AVOID 10% PENALTY ON LINE 8 (a))						
7. Balance Due (Line 5 minus Line 6(E)). (Remittance Payable to the City of Gahanna Must Accompany this Return)						
8. Add: (a) 10% Penalty; Estimate Not Filed or 80% Not Paid (penalty based on Line 7)						
(b) 5% Penalty PER MONTH and 11/4% Interest PER MONTH After April 15						
(c) \$25.00 Penalty for Failure to File By April 15 (GAHANNA REQUEST FOR EXTENSION ENCLOSED)						
9. Total Amount Due						
10. Overpayment Claimed (If Line 6(E) exceeds Line 5) Enter Difference Here \$						
Enter Amount of Line 10 You Want Credited To Your Estimated Tax \$ Refunded \$						
I CERTIFY I HAVE EXAMINED THIS RETURN, INCLUDING ACCOMPANYING SCHEDULES AND STATEMENTS, AND TO THE	E REST OF MY					
KNOWLEDGE AND BELIEF IS TRUE, CORRECT AND COMPLETE, AND THE FIGURES USED HEREIN ARE THE SAME AS USED	FOR FEDERAL					
INCOME TAX PURPOSES, (WITH THE EXCEPTION THAT DEFERRED INCOME MUST BE REPORTED FOR CITY INCOME TAX						
RETURN NOT SIGNED, THIS IS NOT A LEGAL FINAL RETURN. TAXPAYER AND SPOUSE MUST SIGN, EVEN IF ONLY ONE HAS SIGNATURE OF TAXPAYER OR AGENT YOUR OCCUPATION	S INCOME.					
SIGNATURE OF SPOUSE (DATE) SPOUSE'S OCCUPATION	E'S OCCUPATION					
VISA/MasterCard/Discover Accepted	b					
ADDRESS OR NAME AND ADDRESS OF FIRM OR EMPLOYER Expiration Date	_					
ADDRESS OR NAME AND ADDRESS OF FIRM OR EMPLOYER Signature						
TAXPAYER COPY						



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FOR THE CALENDAR YEAR 2001

FORM IR

DUE ON OR BEFORE APRIL 15, 2002

YOUR SOCIAL SECURITY NO.

		SPOUSE'S SOCIAL SECURITY NO.					
		IF MOVED DURING YEAR DATE	GIVE DATE OF MOVE AND CU	RRENT ADDRESS:			
		INTO GAHANNA: NEW ADDRESS					
		DATE					
If name or address is incorrect, m	nake necessary changes	OUT OF GAHANNA: NEW ADDRESS	OUT OF GAHANNA: NEW ADDRESS				
1. ENTER TOTAL COMPENSATION RE	CEIVED BEFORE ANY PAYR	OLL DEDUCTIONS. INC	CLUDE DEFERRED IN	COME.			
PRINT EMPLOYER/CO. NAME	ACTUAL CITY OF EMPLOYMENT	GAHANNA TAX WITHHELD	WAGES, ETC.	MUST			
		\$	\$	SUBMIT			
				W-2(s)			
				AND			
				SCHEDULES			
(A) TOTAL: IF NO OTHER TAXABLE INCOME, COM	MPUTE YOUR TAX ON LINE 4.	\$	TOTAL WAGES, ETC.	\$			
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(B2) Other Credits in 2001							
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	ist be Pro-rated If Part-Year Residen						
	City has been Requested, Tax Credit or		on Amount Actually Taxed)				
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(b) 5% Penalty PER MONTH and 1 ¹ / ₄ % Interest PER MONTH After April 15							
10. Overpayment Claimed (If Line 6(E) exceeds Line 5) Enter Difference Here \$ Enter Amount of Line 10 You Want Credited To Your Estimated Tax \$ Refunded \$							
				THE PECT OF MY			
I CERTIFY I HAVE EXAMINED THIS RE'KNOWLEDGE AND BELIEF IS TRUE, COR							
INCOME TAX PURPOSES, (WITH THE EX	CEPTION THAT DEFERRED IN	COME MUST BE REPORT	ED FOR CITY INCOME	TAX PURPOSES). IF			
RETURN NOT SIGNED, THIS IS NOT A LE		ER AND SPOUSE MUST SI YOUR OCCUPATION	IGN, EVEN IF ONLY ONI	E HAS INCOME.			
SIGNALURE OF TAXPAYER OR AGENT		YOUR OCCUPATION					
SIGNATURE OF SPOUSE	(DATE) S	SPOUSE'S OCCUPATION					
SIGNATURE OF SPOUSE (DATE) SPOUSE S OCCUPATION							
		VISA/Mas	sterCard/Discover Acce	epted			
		V/S/A		•			
SIGNATURE OF PERSON PREPARING IF OTHER THAN TAXPAYER (DATE)		Mastercard Account #					
			Date				
ADDRESS OR NAME AND ADDRESS OF FIRM OR EMPLOYER	Signature						
ORIGINAL COPY							

INSTRUCTIONS

NON-TAXABLE INCOME - The following shall not be considered taxable income:

Capital gains Welfare benefits Unemployment benefits Retirement Income Social Security benefits Interest & dividends Military pay, reserve & active duty

Income earnings of persons under 18 years of age Income received as royalties from patents & copyrights Board of Election Income Workmen's Compensation Alimony

CITIES I ESS THAN 11/ 0/- 6(D)

Line No.

Total of all wages received and attachment of Form(s) W-2 will eliminate possibility of additional questions being asked. Deferred income of any sort must be included for city tax purposes. This income is taxed by Cities when earned, not at retirement time as it is by the State and

Federal government. Value of Life Insurance over \$50,000.00 may need to be added to the wages to arrive at city tax basis. Income other than wages - Income or losses must be accompanied by the appropriate supporting schedules. Business and rental losses cannot be taken against Form W-2 income. However, business or rental loss may be used to offset a business or rental profit as long as the loss and profit are in

the same taxing district. Tax Returns filed with other cities on Schedule C or Schedule E income must accompany the return to receive tax credit.

- Business expenses must be substantiated by proper schedules (Fed. Form 2106). Allowable business expenses must be deducted from wages before tax credit is figured.
 - (b) Moving Expense Limited to the Lesser of Federal allowable amount or the reimbursed amount. (Federal Schedule Must Be Attached. Applies Only to Residents Moving into City.) Allowable moving expenses must be deducted from wages before tax credit is figured.
 - (c) If refund from another city has been requested or received, tax credit must be figured on amount actually taxed.
- Partial year residents pro-rate income for time lived in Gahanna. Include only income earned WHILE a Gahanna resident. Wages earned IN Gahanna CAN NOT be pro-rated.

Tax credit on Line 6(C) or (D) must also be pro-rated.

CITIES 11/ % OD MODE 6(C)

Enter tax total on Line 5 of tax return.

TAX RATES OF SURROUNDING CITIES - USE TO FIGURE LINES 6(C) AND 6(D)

		CITIES - 1/2/0 OK MOKI	CITIES - LESS THAN 1/2 /0 - U(D)				
		LEY - 2%	HILLIARD - 2%	BALTIMORE - 1%			
	CAN.	AL WINCHESTER - 2%	LANCASTER - 1.6%	BREMEN - 1%			
	CHIL	LICOTHE - 11/2%	LOGAN - 1 ¹ / ₂ %	BRICE - 1%			
	CINC	CINNATI - 2.1%	MARBLE CLIFF - 2%	CENTERBURG - 1%			
	CIRC	CLEVILLE - 11/2%	MARION - 1 ³ / ₄ %	DELAWARE - 1.4%			
	CLE	VELAND - 2%	MT. VERNON - $1^{1}/_{2}\%$	GALENA - 1/2%			
	COL	UMBUS - 2%	OBETZ - 2%	LITHOPOLIS - 1%			
	DAY'	ΓON - 2 ¹ / ₄ %	REYNOLDSBURG - 11/2%	LONDON - 1%			
	DUB	LIN - 2%	SPRINGFIELD - 2%	NEW ALBANY - 1%			
	GRA	NVILLE - 1 ¹ / ₂ %	UPPER ARLINGTON - 2%	NEWARK - 11/4%			
	GRO'	VE CITY - 2%	UTICA - 1 ¹ / ₂ %	PICKERINGTON - 1%			
	GRO	VEPORT - 2%	WHITEHALL - 2%	POWELL75%			
	GRA	NDVIEW - 2%	WORTHINGTON - 1.65%	SUNBURY - 1%			
	HEA	ΓH - 1 ¹ / ₂ %	ZANESVILLE - 11/2%	WEST JEFFERSON - 1%			
				WESTERVILLE - 11/4%			
6.	(B2)	List any other credits not covered. If	vou have an overnavment from previous years, en	ter overnavment here			
٥.		32) List any other credits not covered. If you have an overpayment from previous years, enter overpayment here.					
	(C)	C) If your salary and/or income has been TAXED by a city other than Gahanna whose tax rate is 1½% or more, use this calculation: (USE ONLY THAT PORTION OF WAGE/INCOME ACTUALLY TAXED, IF INCOME IS PRO-RATED, INCOME USED IN CALCULATION IS PRO-RATED AMOUNT)					
			NSES $\underline{\text{MUST}}$ BE DEDUCTED FROM WAGES B	· · · · · · · · · · · · · · · · · · ·			
		Total Wages Taxed At 11/2% or more	\$X 1.5% = \$	_ X 83.33% = \$			
				TO LINE 6(C)			
	(D)	(D) If your salary has been taxed by another city whose tax rate is <u>less</u> than 1½%, USE THIS CALCULATION.					
		(USE ONLY THAT PORTION OF WAGE/INCOME ACTUALLY TAXED)					
	(BUSINESS AND MOVING EXPENSES MUST BE DEDUCTED FROM WAGES BEFORE TAX CREDIT IS FIGURED.) Total Wages Taxed \$ X Tax Rate % = \$ X 83.33% = \$ TO LINE 6(D)						
		Total Wages Taxed \$	X Tax Rate% = \$	_ X 83.33% = \$			
		-		TO LINE 6(D)			
7.	Balance of tax due; PAYMENT IN FULL MUST ACCOMPANY return to avoid penalty and interest from due date. If total tax due is <u>less tone dollar</u> , no payment is required.						

- an
- (a) If estimate was required and not filed, 10% penalty must be added; (b) If return is filed AFTER April 15, 2002, 5% penalty PER MONTH and interest of 11/4% PER MONTH must be added to tax due; (c) \$25.00 penalty for failure to file a return by the due date.
- 9. Total of Line 7 & Line 8.
- Any overpayment will be applied to your Declaration for 2002 or carried forward as a credit unless it appears there will be no tax liability. No refunds will be made for amounts less than \$1.00.